

APPLICATION DATA SHEET

APPLICATION INFORMATION

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|--------------------------|-------------------|
| Application Type:: | REGULAR |
| Subject Matter:: | UTILITY |
| CD-ROM or CD-R?:: | NONE |
| Title:: | RECORDING LIQUIDS |
| Attorney Docket Number:: | 294533US0PCT |

INVENTOR INFORMATION

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|---|------------------|
| Applicant Authority Type:: | INVENTOR |
| Primary Citizenship Country:: | Germany |
| Status:: | FULL CAPACITY |
| Given Name:: | Michael |
| Family Name:: | KLUGE |
| City of Residence:: | Ludwigshafen |
| Country of Residence:: | Germany |
| Street of Mailing Address:: | Erfurter Ring 52 |
| City of Mailing Address:: | Ludwigshafen |
| Country of Mailing Address:: | Germany |
| Postal or Zip Code of Mailing Address:: | 67071 |

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|---|---------------|
| Applicant Authority Type:: | INVENTOR |
| Primary Citizenship Country:: | Germany |
| Status:: | FULL CAPACITY |
| Given Name:: | Ulrike |
| Family Name:: | HEES |
| City of Residence:: | Mannheim |
| Country of Residence:: | Germany |
| Street of Mailing Address:: | C2, 20 |
| City of Mailing Address:: | Mannheim |
| Country of Mailing Address:: | Germany |
| Postal or Zip Code of Mailing Address:: | 68159 |

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Germany
Status:: FULL CAPACITY
Given Name:: Dieter
Family Name:: FREYBERG
City of Residence:: Einselthum
Country of Residence:: Germany
Street of Mailing Address:: Jakob-Scheller-Str.1
City of Mailing Address:: Einselthum
Country of Mailing Address:: Germany
Postal or Zip Code of Mailing Address:: 67308

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Germany
Status:: FULL CAPACITY
Given Name:: Henriette
Family Name:: SCHWINDT
City of Residence:: Dirmstein
Country of Residence:: Germany
Street of Mailing Address:: Bodelschwinghstr.24
City of Mailing Address:: Dirmstein
Country of Mailing Address:: Germany
Postal or Zip Code of Mailing Address:: 67246

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Germany
Status:: FULL CAPACITY
Given Name:: Karin
Family Name:: LINSS
City of Residence:: Neustadt
Country of Residence:: Germany
Street of Mailing Address:: Im Altenschemel 20a
City of Mailing Address:: Neustadt
Country of Mailing Address:: Germany
Postal or Zip Code of Mailing Address:: 67435

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

DOMESTIC PRIORITY INFORMATION

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|------------------|-------------------|----------------------|----------------------|
| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This Application | National Stage of | PCT/EP05/01760 | 02/19/05 |

FOREIGN PRIORITY INFORMATION

| | | | |
|---------------------|-----------|---------------|--------------------|
| Application Number: | Country:: | Filing Date:: | Priority Claimed:: |
| 10 2004 009 942.1 | Germany | 02/26/04 | YES |

ASSIGNMENT INFORMATION

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|---|-------------------------|
| Assignee Name:: | BASF Aktiengesellschaft |
| City of Mailing Address:: | Ludwigshafen |
| Country of Mailing Address:: | Germany |
| Postal or Zip Code of Mailing Address:: | 67056 |